MEDICATION PASS WORKSHEET

Provider Number	Surveyor Name	Date	Error Rate		
Record your observ Compare your record	vation of each opportunity for error. ord with physician orders.	 more errors is found observe another 20-	 25 opportunities for error.		
4. Calculate and note Deficiency Formulas:					
Deficiency Formulas: Significant Error + Non-Significant Error 1. One or more Significant Errors = Deficiency Significant Error + Non-Significant Error Doses given + Doses ordered but not given X 100 ≥ 5% = Deficiency					
Identifier	Pour	Pass	Record		
Resident's Full Name	Drug Prescription Name, Dose and Form	Observation of Administration	Drug Order Written As (when different from observation)		

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